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## UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS		UCCCONT 1/1			
A. NAME & PHONE OF CONTACT AT FILER (optional)					
Corporation Service Company 1-800-858-5294  B. E-MAIL CONTACT AT FILER (optional)	•				
SPRFiling@cscinfo.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
116661391 - 336190					
Corporation Service Company	•				
801 Adlai Stevenson Drive	-l l Al-L				
Springfield, IL 62703	d In: Alabama (Shelby)				
	(0,)	THE ABOVE SPA	CE IS FOR F	ILING OFFICE USE C	NLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20111202000364930 12/02/2011		1b. This FINANCING STATE (or recorded) in the REAL Filer: attach Amendment Ad	L ESTATE REC	CORDS	
2. TERMINATION: Effectiveness of the Financing Statement identified a Statement	above is terminated w	ith respect to the security intere	st(s) of Secure	ed Party authorizing this	Termination
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a of For partial assignment, complete items 7 and 9 and also indicate affects		_	of Assignor in i	tem 9	
4. CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law	d above with respect	to the security interest(s) of Sec	cured Party aut	horizing this Continuatio	n Statement is
5. PARTY INFORMATION CHANGE:					
Check one of these two boxes.	one of these three both HANGE name and/or a		me: Complete it	em DELETE name: 0	Sive record name
	HANGE name and/or a em 6a or 6b; <u>and</u> item 7	<u> </u>	me: Complete it , <u>and</u> item 7c	to be deleted in it	
6. CURRENT RECORD INFORMATION: Complete for Party Information C		one name (oa or ob)			
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL	NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Info	ormation Change - provide o	only <u>one</u> name (7a or 7b) (use exact, full n	ame; do not omit, r	nodify, or abbreviate any part of	the Debtor's name)
7a. ORGANIZATION'S NAME		<u> </u>			<u>,                                      </u>
OR 7b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(\$)/INITIAL(\$)					SUFFIX
7c. MAILING ADDRESS	CITY		STATE PO	OSTAL CODE	COUNTRY
O COLLATERAL CHANCE: Also shoots one of the sections of	ADD collateral	DELETE collateral	DESTATE save	mad calleteral A	SSIGN collateral
Indicate collateral:  Filed and Official P Judge Jan County C Shelby Co 06/15/201 S31.00 Cl	Recorded Public Records nes W. Fuhrmeister, Pro Elerk ounty, AL 6 01:24:55 PM		<b>\$</b>	red Collateral A	JOIGIN Collateral
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS If this is an Amendment authorized by a DEBTOR, check here and provide on the original of the second sec	S AMENDMENT: Pide name of authorizin	- , , , , ,	name of Assign	or, if this is an Assignmer	nt)
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL	NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA:301002671/WD/CK	Debtor:SIGN/	ATURE WOOD SPR	NGS, LL	C	116661391